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and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

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07/29/2003

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JA IN IN ENDERT (Depositor's name (Signature (Date)

FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. FILING DATE APPLICATION NO. 018684-000700US Donald Scott McGregor 12/20/2000 09/745,719

TITLE OF INVENTION: MOBILE PHONE SYSTEM WITH HOST PROCESSOR COORDINATION AND INTERNAL MOBILE PHONE ACCOUNTING CAPABILITIES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1300	\$300	\$16	00	10/29/2003	3
EXAMI	INER	ART UNIT	CLASS-SUBCLASS				
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1. Change of correspondence address or indication of "Fee Address" (37 GFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			end and	Townsen
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U "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.					3		_
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Telemac Corporation

Los Angeles California

Please check the appropriate assignee category or cate	egories (will not be printed on the patent)	⊔ individual	U corporation or other private group entity U government				
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Advance Order - # of Copies10	Marche Commissioner is h Deposit Account Number	28 The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number $20-1430$ (enclose an extra copy of this form).					
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